(d) whether incidence of malaria has come down in Orissa in the recent years; and

(e) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA) (a) 928 (Provisional) deaths due to malaria have been reported in the country during the year 2001 as compared to 931 and 1048 deaths during the years 2000 and 1999 respectively.

(b) and (c) Yes, Sir. 1000 malaria prone and predominantly tribal districts of the States of Andhra Pradesh, Jharkhand, Gujarat, Madhya Pradesh, Maharashtra, Chhattisgarh, Orissa and Rajasthan and 19 malaria problematic cities/towns in these States and States of Kamataka, Tamil Nadu and West Bengal have been included under the Enhanced Malaria Control Project (EMCP) with World Bank Support for additional inputs for intensification of anti malaria activities since September, 1997. Seven North Eastern States arc being given 100% Central Assistance w.c.f. December, 1994 for effective malaria control.

(d) and (e) The State of Orissa is having stable malaria with perennial transmission pattern. More than 60% of population in the State live in high risk areas in 210 blocks and 11 urban areas. The incidence of malaria in Orissa is showing fluctuating trend. However, during 2001 there was a decline of 16.04% in malaria cases as compared to previous year.

Availability of health services to rural women and children

1509. SHRIMATI BASANTI SARMA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that health services available to rural women and children arc at par with those of urban areas;

(b) if not, the reasons therefor; and

(c) the steps being taken by Government to provide better and efficient health services in rural areas in the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA) (a) and (b) Government always endeavours to provision for quality of care in delivering basic and essential health services to women and children in both urban and rural areas. However, on account of constraints of difficult terrain, remote locations, distances, difficult communication systems and poor transportation facilities in rural areas, the utilization of these services by the people, remains in-adequate.

(c) Government is taking steps to help State Governments to improve integrated service delivery in the rural areas.

(i) Under the State Health Systems Project, the Community Health Centres and District Hospitals are being upgraded and better equipped to provide quality health services to people in rural and backward areas.

(ii) Under the Pradhan Mantri Gramodaya Yojana, specific provisioning has been made towards repairs and renovation of the public health infrastructure, purchasing of drugs and essential consumables, and contingencies.

(iii) Area Development Projects are also being implemented with financial assistance from external agencies for strengthening of health and family welfare infrastructure. One of the main activities of Area Projects includes construction of buildings for sub-centres, primary health centres and community health centres.

(iv) Under the Reproductive and Child Health Programme, the following steps are being taken to strengthen the primary health services in the country.

* Major Civil Works for repair/construction of OT/Labour Room

* Provision of equipments/medicine for emergency, obstetrics

at selected first referral units.

* Financial assistance for contractual appointments/hiring of Anesthetists/Gynecologists/Safe Motherhood consultants/ Staff Nurses/Lab. Technicians/Additional ANMs etc.

* Skill based in-service training for capacity building of ANMs and other health functionaries.

Efforts are also being made to increase the outreach of health care services through Swasthya Melas and Reproductive and Child Health camps etc.

Survey on nutritional problems of people

1510. SHRI LAJPAT RAI:
SHRIMATI GURCHARAN KAUR:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have ever surveyed the nutritional problems of people living below poverty line;

(b) if so, the outcome thereof and if not, the reasons therefor; and

(c) the steps Government propose to take to address nutritional problems in the Tenth Five Year Plan?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Though no specific survey of nutritional problems of people living below poverty line was carried out at national level, National Nutrition Monitoring Bureau (NN>1B) of Indian Council of Medical Research conducts regular diet and nutritional surveys covering different segments of population including rural, urban, tribal areas of ten States. Department of Women and Child Development in the Government of India has carried out district level nutritional surveys during 1995-96 in 187 districts of 18 Statcs/UTs covering rural and urban population. Further, National Family Health Survey-II (1998-99) has also covered nutritional status in its report. According